FORM D

UNITED STATES
ECURITIES AND EXCHANGE COMMISSION

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076 Expires May 31, 2005 Estimated Average Burden hours per form 16.00

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix	Serial					
DATÉ REC	CEIVED					
1	,					

Name of Offering (check if this is an amendment and name has changed, and ind N.E.W. Holdings I, LLC	icate change.)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 5	06 Section 4(6) ULOE
Type of Filing: New Filing	
A. BASIC IDENTIFICATION DA	TA (44) (04) (04) (14) (14) (14) (14) (14) (14) (14) (1
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indica N.E.W. Holdings I, LLC	te change.) 04042057
Address of Executive Offices (Number and Street, City, State, Zip Code) 22894 Pacific Boulevard, Sterling, Virginia 20166	Telephone Number (Including Area Code) (703) 788-5489
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Not Applicable	Telephone Number (Including Area Code) Not Applicable
Brief Description of Business: Administers warranty and extended service program	ms
Type of Business Organization Corporation Imited partnership, already formed	other (please specify): Limited Liability Company
business trust limited partnership, to be formed	<u>PROCESSED</u>
Actual or Estimated Date of Incorporation or Organization Month 08	Year 2004 SEP 01 2004 Actual Estimated Processors
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abb CN for Canada; FN for other foreign ju	

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

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State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (1/94) 1 of 8

		A. BASIC IDENT	IFICATION DATA		
2. Enter the information	on requested for t	the following:	·		
			rithin the past five years;		
• Each beneficial own securities of the issu		wer to vote or dispose, o	or direct the vote or disp	osition of, 10%	6 or more of a class of equity
• Each executive office	er and director of	corporate issuers and of	corporate general and m	anaging partne	rs of partnership issuers; and
 Each general and ma 	naging partner of	partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or
Full name (Last name first, i Schaufeld, Fredrick D				<u>,</u>	
Business or Residence Addr 22894 Pacific Boulevan			Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or
Full name (Last name first, i Bosserman, David	f individual)				
Business or Residence Addr 22894 Pacific Boulevan			Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	⊠ Executive Officer	☐ Director	☐ General and/or
Full name (Last name first, i Nader, Anthony P.	f individual)				
Business or Residence Addr 22894 Pacific Boulevan			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or
Full name (Last name first, i Kramp, Jeffrey B.	f individual)				
Business or Residence Addr 22894 Pacific Boulevan			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or
Full name (Last name first, i Light, Nathan	f individual)				
Business or Residence Addr 22894 Pacific Boulevan			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or
Full name (Last name first, i Hopf, Patrick	f individual)				
Business or Residence Addr 22894 Pacific Boulevan			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	⊠ Director	General and/or
Full name (Last name first, i Novak, Roger	f individual)				
Business or Residence Addr 22894 Pacific Boulevan			Code)		
(Use blank sheet, or copy	and use addition	nal copies of this sheet, a	s necessary.)		

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

Each executive officeEach general and man		•	. corporate general and fi	anaging partite	rs of partnership issuers;
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or
Full name (Last name first, in Timmerman, Tom	f individual)				
Business or Residence Addre 22894 Pacific Boulevar			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Full name (Last name first, is	f individual)				
Business or Residence Addre	ess (Number and	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or
Full name (Last name first, in	f individual)				
Business or Residence Addre	ess (Number and	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Full name (Last name first, in	f individual)				
Business or Residence Addre	ess (Number and	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or
Full name (Last name first, it	f individual)				
Business or Residence Addre	ess (Number and	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or
Full name (Last name first, in	f individual)				
Business or Residence Addre	ess (Number and	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or
Full name (Last name first, in	f individual)				
Business or Residence Addre	ess (Number and	1 Street, City, State, Zip	Code)		
(Use blank sheet, or copy	and use addition	nal copies of this sheet, a	s necessary.)		

B. INFORMATION ABOUT OFFERING												
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No			
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?									. <u>\$n/a</u>			
								Yes	No			
 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. 								_				
Full Name	(Last nam World M a											
Business of 425 Le			(Number a v York, Ne			e, Zip Code	e)					
Name of A	Associated 1	Broker or I	Dealer									
States in V	Vhich Perso	on Listed H	Ias Solicite	d or Inten	ds to Solici	it Purchase	rs					
(Check '	'All States'	or check i	ndividual :	States)			,		************		. 🛛 🛚	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	Full Name (Last name first, if individual)											
Business o	or Residenc	e Address	(Number a	nd Street,	City, State	e, Zip Code	e)	***************************************				
Name of A	Associated 1	Broker or I	Dealer									
States in V	Vhich Perso	on Listed F	Ias Solicite	d or Inten	ds to Solici	it Purchase	rs					
(Check '	'All States'	or check	ndividual :	States)	•••••						. 🔲 🛚	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nam	e first, if ir	dividual)									
Business o	Business or Residence Address (Number and Street, City, State, Zip Code)											
Name of A	Name of Associated Broker or Dealer											
			(Use blank	sheet, or o	copy and us	se addition	al copies o	f this sheet,	as necessa	ry.)		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES	S AND USE OI	PR	OCE	EEDS
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
Type of Security		Aggregate Offering Price			Amount Already Sold
Debt	\$	75,000,000	•	\$	75,000,000
Equity	\$	none	,	\$	none
☐ Common ☐ Preferred				-	
Convertible Securities (including warrants)	\$	*		\$	none
Partnership Interests	\$	none		\$	none
Other (Specify:)	\$	none		\$	none
Total	\$	75,000,000	,	\$	75,000,000
Answer also in Appendix, Column 3, if filing under ULOE.					
an unsecured senior subordinated basis by four of the Issuers' subsidiaries; Wa Notes will be exercisable for shares of non-voting common stock of the sole Met. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	mber		the		
		Number Investors			Aggregate Dollar Amount of Purchases
Accredited Investors		11		<u>\$</u>	75,000,000
Non-accredited Investors		0	_	\$	0
Total (for filings under Rule 504 only)				\$	
Answer also in Appendix, Column 4, if filing under ULOE.					
3. If this filing is for an offering under Rule 504 or 505, enter the information requeste the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the fi offering. Classify securities by type listed in Part C - Question 1.					
Type of offering		Type of Security			Dollar Amount Sold
Rule 505				\$	
Regulation A				\$	
Rule 504				<u> </u>	
Total				<u> </u>	
4. a. Furnish a statement of all expenses in connection with the issuance and distribut offering. Exclude amounts relating solely to organization expenses of the issuer. The inform subject to future contingencies. If the amount of an expenditure is not known, furnish an estitute left of the estimate.	ation	may be given as			
Transfer Agent's Fees				\$	
Printing and Engraving Costs	· • • • • • • • • • • • • • • • • • • •			\$	
Legal Fees			\boxtimes	\$	153,750
Accounting Fees				\$	
Engineering Fees				\$	
Sales Commissions (specify finders' fees separately)		***************************************		\$	
Other Expenses (identify) misc and filing fees		·····	\boxtimes	\$	10,000
Total			N	•	163 750

b. Enter the difference between the aggregate offering price given Part C –Question 1 and total expenses furnished in response to Part 4.a. This difference is the "adjusted gross proceeds to the issuer."					\$74,836,250
Indicate below the amount of the adjusted gross proceeds to the inproposed to be used for each of the purposes shown. If the ampurpose is not known, furnish an estimate and check the box to the	nount for any the left of the				
			Payments to Officers, Directors, & Affiliates		Payments To Others
alaries and fees		<u>\$</u>	0.00	<u> </u>	2,250,000
urchase of real estate		<u> </u>	0.00	<u>\$</u>	0.00
urchase, rental or leasing and installation of machinery and equipmen	nt	<u> </u>	0.00	<u> </u>	0.00
Construction or leasing of plant buildings and facilities		<u> </u>	0.00	<u>\$</u>	0.00
equisition of other businesses (including the value of securities invol	lved in this				
ring that may be used in exchange for the assets or securities of anoth	er issuer	\Box s	0.00		0.00
		=			0.00
• •					0.00
• .					0.00
					2,250,000
ota: Laymonio Elistoa (cotami totale adaea)			<u> </u>		
D. FEDER	AL SIGNAT	URE		•••	
ollowing signature constitutes an undertaking by the issuer to furnish	to the U.S. Se	curities a	nd Exchange Cor	nmission, upo	
	Signature			Date August 30	0, 2004
ne of Signer (Print or Type)	itle of Signer	(Print o	r Type)		
Jeffrey B. Kramp	S	Senior V	P, Secretary &	General Co	ounsel
	purpose is not known, furnish an estimate and check the box to estimate. The total of the payments listed must equal the adjusted go to the issuer set forth in response to Part C - Question 4.b above. Salaries and fees Purchase of real estate Purchase, rental or leasing and installation of machinery and equipment construction or leasing of plant buildings and facilities Acquisition of other businesses (including the value of securities involving that may be used in exchange for the assets or securities of another and to a merger) Repayment of indebtedness Vorking capital Other (specify) – Stock Repurchases Column Totals Cotal Payments Listed (column totals added) D. FEDER The issuer has duly caused this notice to be signed by the undersign of the information furnished by the issuer to any non-accredited ther (Print or Type) S.W. Holdings I, LLC The of Signer (Print or Type)	Construction or leasing and installation of machinery and equipment. Construction of other businesses (including the value of securities involved in this ring that may be used in exchange for the assets or securities of another issuer manner of indebtedness. Column Totals Cotal Payments Listed (column totals added) D. FEDERAL SIGNAT The issuer has duly caused this notice to be signed by the undersigned duly authollowing signature constitutes an undertaking by the issuer to furnish to the U.S. Se is staff, the information furnished by the issuer to any non-accredited investor pursuater (Print or Type) C.W. Holdings I, LLC Title of Signer Title of Signer	purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Salaries and fees	purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Affiliates Salaries and fees \$ 0.00 Purchase of real estate \$ 0.00 Construction or leasing and installation of machinery and equipment \$ 0.00 Construction or leasing of plant buildings and facilities \$ 0.00 Acquisition of other businesses (including the value of securities involved in this ring that may be used in exchange for the assets or securities of another issuer uant to a merger) \$ 0.00 Exercise the first that may be used in exchange for the assets or securities of another issuer uant to a merger) \$ 0.00 Exercise the first that may be used in exchange for the assets or securities of another issuer uant to a merger) \$ 0.00 Exercise that may be used in exchange for the assets or securities of another issuer uant to a merger) \$ 0.00 Exercise that may be used in exchange for the assets or securities of another issuer uant to a merger) \$ 0.00 Exercise that may be used in exchange for the assets or securities of another issuer unant to a merger) \$ 0.00 Exercise that may be used in exchange or the assets or securities of another issuer unant to a merger \$ 0.00 Exercise that may be used in exchange or the assets or securities of another issuer unant to a merger \$ 0.00 Exercise the issuer to any non-accredited investor pursuant to paragraph (b)(2) of I are (Print or Type) Exercise the issuer to any non-accredited investor pursuant to paragraph (b)(2) of I are (Print or Type) Exercise the issuer to any non-accredited investor pursuant to paragraph (b)(2) of I are (Print or Type) Exercise the first of the source of the payments in the undersigned duly authorized person. If this no collowing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Core is staff, the information furnished by the issue	purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Affiliates Islamics and fees

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations.

(See 18 U.S.C. 1001.)

	E. ST	TATE SIGNATURE	A shakifika a sa				
1.	Is any party described in 17 CFR 230.262 presently surule? Not applicable	· · · · · · · · · · · · · · · · · · ·					
	See Appendix,	Column 5, for state response.					
2.	The undersigned Issuer hereby undertakes to furnish to any sta CFR 239.500) at such times as required by state law. Not applie		notice is filed, a notice on Form D (17				
3.	. The undersigned Issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not applicable						
4.	The undersigned Issuer represents that the issuer is familiar Offering Exemption (ULOE) of the state in which this notice has the burden of establishing that these conditions have been so	is filed and understands that the issuer clar					
Th	ne issuer has read this notification and knows the contents to be duly authorized person.	true and has duly caused this notice to be	signed on its behalf by the undersigned				
	suer (Print or Type)	Signature M	Date				
N.	.E.W. Holdings I, LLC		August 30, 2004				
N	ame of Signer (Print or Type)	Title of Signor (Print or Type)					
	Jeffrey B. Kramp	Sr. Vice President, Seco	retary, General Counsel				

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.